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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA

CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s): wayne Jones Massie, Jr.	Case No:
This plan, dated June 20, 2014 , is:	
the <i>first</i> Chapter 13 plan filed in this cas a modified Plan, which replaces the confirmed or unconfirmed Plan date	
Date and Time of Modified Plan Confirm	ming Hearing:
Place of Modified Plan Confirmation He	earing:
The Plan provisions modified by this filing are	x:
Creditors affected by this modification are:	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, <u>and the included motions in paragraphs 3, 6, and 7 to value collateral</u>, avoid liens, and assume or reject unexpired leases or executory contracts may be <u>granted</u>, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$182,300.54

Total Non-Priority Unsecured Debt: \$60,161.23

Total Priority Debt: **\$0.00**Total Secured Debt: **\$182,628.44**

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- 1. Funding of Plan. The debtor(s) propose to pay the trustee the sum of \$1,100.00 Monthly for 39 months, then \$1,500.00 Monthly for 19 months. Other payments to the Trustee are as follows: NONE . The total amount to be paid into the plan is \$ 71,400.00 .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$\(\frac{2,620.00}{\text{ payments to remaining creditors.}}\) balance due of the total fee of \$\(\frac{2,750.00}{\text{ concurrently}}\) concurrently with or prior to the payments to remaining creditors.
 - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Creditor	Type of Priority	Estimated Claim	Payment and Term
-NONE-			

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u>

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

<u>Creditor</u> <u>Collateral Description</u> <u>Adeq. Protection</u> <u>Monthly Payment</u> <u>To Be Paid By</u>

-NONE-

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Approx. Bal. of Debt or Creditor Collateral Collateral Pown" Value None
Approx. Bal. of Debt or Creditor None
"Crammed Down" Value Rate Monthly Paymt & Est. Term**

E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately ___100 %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately ___0 %.
- B. Separately classified unsecured claims.

<u>Creditor</u> <u>Basis for Classification</u> <u>Treatment</u>

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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
 - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

Creditor	Collateral	Regular Contract Payment	Estimated Arrearage	Arrearage Interest Rate	Estimated Cure Period	Monthly Arrearage Payment
Beacon Credit Union	2010 Nissan Rogue	339.00	0.00	<u>0%</u>	0 months	<u>1 ayıncın</u>
Beneficial/Household	157 Shady Oak Drive, Madison	1,315.00	1,380.17	0%	3 months	Prorata
Finance	Heights(value based on tax					
	assessment), owned with wife					
Capital One Auto	2012 Mazda 6, owned with	430.00	0.00	0%	0 months	
Finance	Mary Massie					

B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular			Monthly
		Contract	Estimated Interest	Term for	Arrearage
Creditor	Collateral	Payment	Arrearage Rate	Arrearage	Payment
-NONE-					

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

		Interest	Estimated	
Creditor	<u>Collateral</u>	Rate	Claim	Monthly Paymt& Est. Term**
-NONE-				

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
 - **A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor	Type of Contract
NONE	

B. Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

-Leonard-	Storage Building	N/A	N/A	N/A
Creditor	Type of Contract	Arrearage	for Arrears	Cure Period
			Payment	Estimated
			Monthly	

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7.	Liens	Which	Debtor(s)	Seek to	A void
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A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

Exemption Amount

Value of Collateral

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

- 8. Treatment and Payment of Claims.
 - All creditors must timely file a proof of claim to receive payment from the Trustee.
 - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
 - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
 - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

/s/ T. Henry Clarke IV	
T. Henry Clarke IV	
Debtor's Attorney	
	T. Henry Clarke IV

Exhibits: Copy of Debtor(s)' Budget (Schedules I and J);

Matrix of Parties Served with Plan

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Certificate of Service

I certify that on _______, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ T. Henry Clarke IV
T. Henry Clarke IV
Signature
311 West Main Street
Bedford, VA 24523

Address

540-587-9299

Telephone No.

Ver. 09/17/09 [effective 12/01/09]

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Fill	in this information to identify you	ir case.							
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Uni	ited States Bankruptcy Court for	the: WESTERN DISTRICT	T OF VIRGINIA						
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sup spo atta	as complete and accurate as p plying correct information. If y use. If you are separated and y ch a separate sheet to this for	ou are married and not fili our spouse is not filing w	ng jointly, and your s ith you, do not includ	pouse is le informa	iving with	h you, incl ut your spo	ude information ouse. If more spa	about your ace is needed,	
Pa	rt 1: Describe Employme	nt							_
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spe	ouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			■ Emplo	•		
	employers.	Occupation	Front Line Mana	Front Line Manager			Administrative		
	Include part-time, seasonal, or self-employed work.	Employer's name	B & W Nuclear O	peration	S	Johnso	n Senior Cente	r	
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	2016 Mt. Athos R Lynchburg, VA 2		7	P. O. Bo	ox 989 st, VA 24521		
		How long employed t	here? 28 years	i		4	years		
Pai	Give Details About N	Monthly Income							
	imate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to re	port for an	y line, wri	te \$0 in the	space. Include y	our non-filing	
	ou or your non-filing spouse have e space, attach a separate sheet		ombine the information	for all em	ployers fo	r that perso	on on the lines be	ow. If you need	ţ
					For De	btor 1	For Debtor 2 o		
2.	List monthly gross wages, sa deductions). If not paid month			2.	57	7,506.65	\$1,93	4.53	
3.	Estimate and list monthly ov	ertime pay.		3. +	§	0.00	+\$	0.00	
4.	Calculate gross Income. Add	d line 2 + line 3.		4.	7,5	06.65	\$ 1,934.5	<u>i3</u>	

Official Form B 6I Schedule I: Your Income page 1

For Debtor 1	Deb	tor 1	Wayne Jones Massie, Jr.	-	Case r	number (<i>if known</i>)			
Copy line 4 here									
S. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. No mandatory for deductions. Specify: 5c. Add the payroll deductions. Specify: 5c. Add the payroll deductions. Specify: 5c. No mandatory received 1c. List at ll other income regularly receive 1c. List at ll other from rental property and from operating a business, profession, or farm 1c. Payroll plans for mandatory received include alimony, spousal support, child support, maintenance, divorce sertiment, and propenty settlement. 8c. Social Security 8d. Unemployment compensation 8d. Social Security 8d. Unemployment compensation 8d. Social Security 8d. Other government assistance that you receive and the value (if known) of any non-cash assistance that you receive, such as tood stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidice. 8d. Other government assistance and the value (if known) of any non-ca					For	Debtor 1			
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for voluntary for the form of the form o		Сор	y line 4 here	4.	\$	7,506.65			
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55. Mandatory contributions for retirement plans 5c. Voluntary Contributions for retirement fund loans 5c. Voluntary Contributions for the form of the following f		5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1.782.18	\$	309.95	
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. Sp. Union dues 5g. Union		5b.	Mandatory contributions for retirement plans	5b.	\$		\$		
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6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,958.80 \$ 309.95 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 5,547.85 \$ 1,624.58 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ 0.00 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ \$ 0.00 10. \$ 5,547.85 + \$ 1,624.58 = \$ 7,172.43 11. **State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. 12. **Combined monthly income**					· —		<u>, — — </u>	_	
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8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8c+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8c+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it provides that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it provides the summary of Schedules and Statistical Summary of Certain Liabilities and R					· —		· 		
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13. Do you expect an increase or decrease within the year after you file this form? ■ No.	12.	Write	e that amount on the Summary of Schedules and Statistical Summary of Certa				a. if it	. \$	7,172.43
13. Do you expect an increase or decrease within the year after you file this form?No.									
■ No	13.	Do v	ou expect an increase or decrease within the year after you file this form	?				monunty	HICOHIE
			·						
			Yes. Explain:						

Official Form B 6I Schedule I: Your Income page 2

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Fill	in this information to identify	your case:				
Deb	otor 1 Wavne Jo	nes Massie, Jr.		Check	if this is:	
				☐ An	amended filing	
	otor 2			□ A :	supplement showing	g post-petition chapter 13
(Sp	ouse, if filing)			ex _]	penses as of the follo	owing date:
Uni	ted States Bankruptcy Court fo	or the: WESTERN DISTRICT OF VIRO	GINIA	N	MM / DD / YYYY	
Cas	e number			ПА	separate filing for D	ebtor 2 because Debtor 2
(If k	known)	<u> </u>			nintains a separate h	
	fficial Form B 6J	- Evnangag				12/1
	chedule J: Your l	DAPENSES possible. If two married people are filing	g together both are equally	v rosnons	ible for supplying	12/1
info	ormation. If more space is ne	eded, attach another sheet to this form.				
(if l	known). Answer every question	on.				
Part		ehold				
1.	Is this a joint case?					
	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live	in a separate household?				
	□ No					
	☐ Yes. Debtor 2 mi	ust file a separate Schedule J.				
2.	Do you have dependents?	No				
	Do not list Debtor 1 and Debtor 2.	☐ Yes. Fill out this information for each dependent	Dependent's relationsl Debtor 1 or Debtor 2	hip to	Dependent's age	Does dependent live with you?
	Do not state the dependents'					□ No
	names.					☐ Yes
						□ No
						☐ Yes
						□ No
						☐ Yes
						□ No □ Yes
3.	Do vour expenses include	.				□ res
	expenses of people other th					
	yourself and your depende	nts? Lies				
Part		ing Monthly Expenses				
		or bankruptcy filing date unless you are ankruptcy is filed. If this is a supplemen				
_	olicable date.	anki upicy is med. If this is a supplemen	nai Schedule J, check the b	ox at the	top of the form and	u iiii iii tile
T1	l					
		on-cash government assistance if you k ed it on <i>Schedule I: Your Income</i> (Officia			Your exp	enses
4.	The rental or home owners	ship expenses for your residence. Include	a firet mortgaga paymante			
4.	and any rent for the ground of		e mst mortgage payments	4. \$		1,315.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		85.00
	4b. Property, homeowner	's, or renter's insurance		4b. \$		54.00
		epair, and upkeep expenses		4c. \$		175.00
5.		tion or condominium dues ents for your residence, such as home eq	wity loons	4d. \$ 5. \$		0.00 0.00
J.	Audiuonai moi igage päym	cino ioi your residence, such as nome eq	juity 10aiis	J. Þ		V.UU

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ebtor 1	Wayne Jones Massie, Jr.	Case num	ber (if known)	
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	205.00
6b.	Water, sewer, garbage collection	6b.	\$	61.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	394.00
6d.	Other. Specify:	6d.	\$	0.00
Food	and housekeeping supplies	7.	\$	650.00
Chil	dcare and children's education costs	8.	\$	0.00
Clot	hing, laundry, and dry cleaning	9.	\$	100.00
	onal care products and services	10.	\$	0.00
Med	ical and dental expenses	11.	\$	400.00
Trai	sportation. Include gas, maintenance, bus or train fare.			
Do n	ot include car payments.	12.	· .	475.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
	ritable contributions and religious donations	14.	\$	250.00
	rance.			
	ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	\$	0.00
15a. 15b.		15a. 15b.		0.00
150.		150. 15c.	· -	0.00
15c. 15d.		15c. 15d.		117.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	φ	0.00
Spec	ify:	16.	\$	0.00
	allment or lease payments:		Ф	
17a.	1 2	17a.	·	431.00
17b.	1 2	17b.	·	340.00
17c.	Other. Specify: Storage Building	17c.		84.00
17d.	1 5	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as deduct	ed 18.	\$	0.00
	your pay on line 5, Schedule I, Your Income (Official Form 6I). er payments you make to support others who do not live with you.	10.	\$	0.00
Spec		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I:</i> 1		ie.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.		20e.	\$	0.00
Othe	er: Specify: Emergency Fund	21.	+\$	100.00
	sonal Care		+\$	75.00
	dent Loans for daughter paid by wife		+\$	661.10
You	r monthly expenses. Add lines 4 through 21.	22.	\$	6,047.10
	result is your monthly expenses.		-	
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		7,172.43
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	6,047.10

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Massie, Jr., Wayne -

AVANT CREDIT 640 N. LA SALLE DRIVE SUITE 635 CHICAGO, IL 60654

BARCLAYS BANK 700 PRIDES XING NEWARK, DE 19713

BEACON CREDIT UNION
P. O. BOX 4319
LYNCHBURG, VA 24502-4319

BENEFICIAL/HOUSEHOLD FINANCE P. O. BOX 3425 BUFFALO, NY 14240

BEST BUY CREDIT SERVICES P. O. BOX 790441 ST. LOUIS, MO 63179

BEST CHOICE 123.COM P. O. BOX 472 TALMAGE, CA 95481

BLAZE MASTERCARD P. O. BOX 5096 SIOUX FALLS, SD 57117-5096

CAPITAL ONE
P. O. BOX 30285
SALT LAKE CITY, UT 84130-0285

CAPITAL ONE
P. O. BOX 30281
SALT LAKE CITY, UT 84130

CAPITAL ONE AUTO FINANCE P. O. BOX 259407 PLANO, TX 75025

CASH NET USA
P. O. BOX 643990
CINCINNATI, OH 45264-3990

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Massie, Jr., Wayne -

CCS/FIRST NATIONAL BANK 500 E 60TH STREET N SIOUX FALLS, SD 57104

CCS/FIRST SAVINGS BANK 500 E 60TH STREET N SIOUX FALLS, SD 57104

CITIBANK/EXXON/MOBIL P. O. BOX 6497 SIOUX FALLS, SD 57117

CITIBANK/NTB P. O. BOX 6497 SIOUX FALLS, SD 57117

CREDIT ONE BANK
P. O. BOX 98873
LAS VEGAS, NV 89193

DELBERT SERVICES CORP. P. O. BOX 4730 ANAHEIM, CA 92803

FMA ALLIANCE P. O. BOX 2409 HOUSTON, TX 77252-2409

GE CAPITAL RETAIL BANK ATTN: BANKRUPTCY DEPT. P. O. BOX 965060 ORLANDO, FL 32896-5060

KATHY MASSIE

LENDING CLUB CORPORATION 71 STEVENSON STREET SUITE 300 SAN FRANCISCO, CA 94105

LEONARD
P. O. BOX 1728
MT. AIRY, NC 27030

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Massie, Jr., Wayne -

MARY MASSIE

MERRICK BANK 10705 S. JORDAN GTWY SUITE 200 SOUTH JORDAN, UT 84095

MOBILOANS P. O. BOX 1409 MARKSVILLE, LA 71351

NET CREDIT 200 W. JACKSON BLVD SUITE 1400 CHICAGO, IL 60606

SEVEN CORNERS FINANCIAL 400 S. MAPLE AVENUE SUITE 210 FALLS CHURCH, VA 22046

SHELL/CITIBANK
P. O. BOX 6406
SIOUX FALLS, SD 57117

SPRINGLEAF FINANCIAL 2128 WARDS ROAD LYNCHBURG, VA 24502

SYNCB/TOYSRUS
P. O. BOX 965005
ORLANDO, FL 32896

SYNCHRONY BANK/LOWES P. O. BOX 965005 ORLANDO, FL 32896

SYNCHRONY BANK/WALMART P. O. BOX 965024 ORLANDO, FL 32896

TARGET CREDIT
P. O. BOX 673
MINNEAPOLIS, MN 55440